United States Bankruptcy Court/Southern District of New York Claim Lehman Brothers Holdings Claims Processing Center c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076 In Re: Lehman Brothers Holdings Inc., et al., Debtors. Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered) Note: This form may not be used to file claims other than those based on Lehman Programs Securities as listed on http://www.lehman-docket.com as of July 17, 2009 Name and address of Creditor: (and name and address where notices should be sent if different from Creditor) The Royal Bank of Scotland plc of Respective in the Royal Bank of Respective in the Royal B	0	8-13555-mg Doc	6185-3 File	ed 12/14/09	Entered 12/14/09 1	7:06:02	Amended	
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Lehman Brodens Holdings Inc., et al., Case No. 08-13555 (IMP) (Includy Administered)	Lehman Bro c/o Epiq Bar FDR Station	others Holdings Claims Prod okruptcy Solutions, LLC o, P.O. Box 5076	cessing Center					
Name and address of Creditor: And name and address where notices should be sent if different from Creditor) Name and address of Creditor: And name and address where notices should be sent if different from Creditor) The Royal Bank of Scotland plc or RBS Securities Inc. Anth: Pia Firsk, Managing Director and Anth: Inc. Anth: Pia Firsk, Managing Director and Securities Inc. Anth: Pia Firsk, Managing Director and Securities Inc. Bank Securities Inc. Anth: Pia Firsk, Managing Director and Securities Inc. Bank Securities Inc. Court Claim Number: 59561 ((I honow) Filled on: 10/30/2008 Telephone number: (203) 897-6738	Lehman Bro	thers Holdings Inc., et al.,	Case No. 08-13					
Creditor) The Royal Bank of Scotland plo of NRS Securities in Court Claim Mumber: 59561 The Royal Bank of Scotland plo of NRS Securities for Course! After Iteran M. Goldaten Sentor Course! The Royal Bank of Scotland plo Out of Native Iteran M. Goldaten Standard, CT 08901 Telephone number: (203) 897-6738 Email Address: pla frie@bs.com Name and address where payment should be sent (if different from above) Telephone number: (203) 897-6738 Email Address: pla frie@bs.com Name and address where payment should be sent (if different from above) Telephone number: (203) 897-6738 Email Address: 1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on Sperember 15, 2008 are acquired them thereafter, and whether such claim matured or beame fixed or liquidated before or after September 15, 2008 are folious that should be active to the claim amount must be stated in United States dollars, using the exchange rate as applicable on September 15, 2008. If you are filling this claim with respect to more than one Lehman Programs Securities on September 15, 2008 are folious than the claim amount of States and the claim amount for each Lehman Programs Security to which this claim relates. Amount of Claim: No less than \$72,202,484. As of September 15, 2008, If you are filling this claim with respect to more than one Lehman Programs Security to which this claim relates. 2. Provide the International Securities Identification Number (ISIN): XS0254171191 3. Provide the Clearsteam Bank Blocking Number; for each Lehman Programs Securities to which this claim relates. International Securities Identification Number (ISIN): XS0254171191 3. Provide the Clearsteam Bank Blocking Number; for each Lehman Programs Securities on your behalt). If you are filling this claim with respect to more than one Lehman Programs Securities on your behalt). If you are filling t	based on L	ehman Programs Secu	irities as listed o		CE IS FOR C	OURT USE ONLY		
of RBS Securities Inc. After, Pia Frisk, Managing Director and Senior Coursed Stanford, CT 68801 Stanford, CT 68801 Telephone number: (203) 897-6738	Creditor)	·			e sent if different from			
Filed on: 10/30/2009	c/o RBS Sec Attn: Pia Friis	BS Securities Inc. Dewey & LeBoeuf LLP Pia Friis, Managing Director and Attn: Irena M. Goldstein					***************************************	
Name and address where payment should be sent (if different from above) Check this box if you are aware that relating to your claim. Attach copy of statement giving particulars. Telephone number:	600 Washing Stamford, CT	Washington Boulevard New York, NY 10019					10/30/2009	
Telephone number: Email Address: 1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008 or acquired them thereafter, and whether such chain matured systems froed or liquides 45, 2008. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the claim amounts for each Lehman Programs Security to which this claim related in United States, you may attach a schedule with the claim amounts for each Lehman Programs Security to which this claim related in United States, Amount of Claim: and was owed accrued prepetition interest of e203,036. The EUFR-USD oxtonage rate on September 15, 2008 amount of Claim: and was owed accrued prepetition interest of e203,036. The EUFR-USD oxtonage rate on September 15, 2008 amount of Claim: and was owed accrued prepetition interest of e203,036. The EUFR-USD oxtonage rate on September 15, 2008 amount of Claim includes interest or other charges in addition to the principal amount due on the Lehman Programs Securities. 2. Provide the International Securities Identification Number (ISIN) for each Lehman Programs Security to which this claim relates. International Securities Identification Number (ISIN): X80254171191 (Required) 3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a. "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim related. 4. Provide the C								
1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008 and sequired them thereafter, and whether such claim manuted or became fixed or liquidated before or after September 15, 2008. It is claim amount must be the stated in United States dollars, using the exchange rate as applicable on September 15, 2008. If you are filing this claim with respect to more than one Lehman Programs Security to which this claim relates. Amount of Claim: No less than \$72,928,484. As of September 15, 2008, The Royal Bank of Scotland ple held an aggregate principal amount of £51,000,000 and was owed accrued prepetition interest of £203,036. The EUR-LIDB exchange rate on September 15, 2008 was 1,4243. 22. Provide the International Securities Identification Number (ISIN) for each Lehman Programs Security to which this claim relates. 23. Provide the International Securities Identification Number (ISIN): XS0254171191 (Required) 33. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing this claim with respect to more than one Lehman Programs Security of which you are filing this claim with respect to more than one Lehman Programs Security for which you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Number form your accountholder (i.e. the bank, broker or other entiry that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates. Clearstream Bank Blocking Number, Euroclear Bank Clearstream Bank or other	Name and address where payment should be sent (if different from above)					anyone el relating to	se has filed a proof of claim your claim. Attach copy of	
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